

ISSUE SLIP STAPLE AREA (for additional cross references)

10525 U.S. PTO

| POSITION            | INITIALS | ID NO. | DATE    |
|---------------------|----------|--------|---------|
| FEE DETERMINATION   | SD       | 71058  | 4-29-99 |
| O.I.P.E. CLASSIFIER |          |        | 5-3-99  |
| FORMALITY REVIEW    |          | 71557  | 5/18/99 |

INDEX OF CLAIMS

+ = Rejected  
 - (Through numeral) Allowed  
 + = Canceled  
 - Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

| Claim          | Date |
|----------------|------|
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| Claim          | Date |
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| Claim          | Date |
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POST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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